

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052403

Entity Name: GARY MUSGROVE LLC

FILED
Feb 24, 2005
Secretary of State

Current Principal Place of Business:

24949 NE IRA FOWLER RD
ALTHA, FL 32421

New Principal Place of Business:

Current Mailing Address:

24949 NE IRA FOWLER RD
ALTHA, FL 32421

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSGROVE, GARY
24949 NE IRA FOWLER RD
ALTHA, FL 32421 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MUSGROVE, GARY
Address: 24949 NE IRA FOWLER RD
City-St-Zip: ALTHA, FL 32421

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GARY MUSGROVE

MGR

02/24/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date